

12-20-2006

Form PTO-1595

(Rev. 9-04)

OMB No. 0651-0027 (exp. 6/30/05)

RECORDED



103351673

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

To the Director of the United States Patent and Trademark Office: Please record the attached documents or the new address(es) below.

## 1. Name of conveying party(ies)/Execution Date(s):

Robert T. McCulloch

Execution Date(s): 12/13/2006

Additional names of conveying parties attached? \_\_\_ Yes ☒ No

## 3. Nature of conveyance:

☒ Assignment ☐ Merger  
☐ Security Agreement ☐ Change of Name  
☐ Government Interest Assignment  
☐ Executive Order 9424, Confirmatory License  
☐ Other \_\_\_\_\_

## 2. Name and address of receiving party(ies):

Name: FKA Distributing Co. d/b/a HoMedics, Inc.

Internal Address: \_\_\_\_\_

Street Address: 3000 Pontiac Trail

City: Commerce Twp. State: MI

Country: USA Zip: 48390

Additional names, addresses, or citizenship attached? \_\_\_ Yes ☒ No4. Application or patent number(s): ☒ This document is being filed together with a new application.

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? \_\_\_ Yes ☒ No

## 5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Stephanie M. Mansfield

Internal Address: Brooks Kushman P.C.

Street Address: 1000 Town Center

Twenty-Second Floor

City: Southfield

State: MI Zip: 48075-1238

Phone Number: (248) 358-4400

Fax Number: (248) 358-3351

Email Address: smansfield@brookskushman.com

## 6. Total number of applications and patents involved: 1

## 7. Total fee (37 CFR 1.21(h) &amp; 3.41) \$ 40.00

☐ Authorized to be charged by credit card  
☐ Authorized to be charged to Deposit Account  
☒ Enclosed  
☐ None required (government interest not affecting title)

## 8. Payment Information:

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
b. Deposit Account Number \_\_\_\_\_  
Authorized User Name \_\_\_\_\_

## 9. Signature:

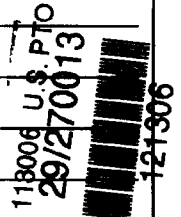
Signature

Stephanie M. Mansfield  
Name of Person Signing

December 13, 2006

Date

Total number of pages including cover sheet, attachments, and document: 2



12/15/2006 JBALINAN 00000043 29270013

04 FC:8021

40.00 DP

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:

Mail Stop Assignment Recordation Services, Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450

PATENT  
REEL: 018713 FRAME: 0230

**ASSIGNMENT**

For good and valuable consideration, receipt of which is hereby acknowledged, I, Robert T. McCulloch of 21372 Florence Drive, Macomb, MI 48044 do hereby assign, sell and set over to FKA Distributing Co. d/b/a Homedics, Inc., a corporation organized and existing under the laws of the State of Michigan, and having a place of business at 3000 Pontiac Trail, Commerce Township, Michigan 48390, hereinafter referred to as the ASSIGNEE, its successors, assigns or other legal representatives, the entire right, title and interest, domestic and foreign, in and to the inventions and discoveries in

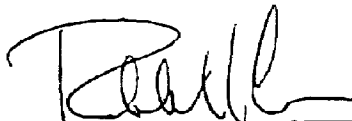
**BLOOD PRESSURE MONITOR**

for which an application for a United States Patent is to be filed or will have been filed on \_\_\_\_\_, as Application Serial No. \_\_\_\_\_. (I hereby authorize my attorney to insert the application filing date and serial number when they become known), including the right of said ASSIGNEE, its successors, assigns or other legal representatives to make applications and to receive Letters Patent for said inventions and discoveries in any and all foreign countries in its or their own name or names, or in my name, at its or their election, and I hereby assign, sell and set over to said ASSIGNEE, its successors, assigns or other legal representatives, all rights of priority, including any provisional applications, in and to said inventions and discoveries in all countries, including all applications claiming benefit of the filing date hereof, continuations, continuations-in-part, divisionals, reexaminations and reissue applications.

And I hereby agree for myself, my heirs, successors, assigns or other legal representatives to execute any and all papers, including applications for Letters Patent of any and all kinds and in any and all countries and to perform any and all acts which said ASSIGNEE, its successors, assigns or other legal representatives may deem necessary to secure thereto the rights herein assigned, sold and set over.

And I hereby represent and warrant that I have not granted any rights inconsistent with the rights granted herein.

Date: 12/13/, 2006

  
Robert T. McCulloch

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me Robert T. McCulloch, to me known to be the person named in and who executed the above instrument, and acknowledged that he executed the same for the uses and purposes therein mentioned.

\_\_\_\_\_  
Notary Public  
My Commission expires:

(SEAL)

PATENT

RECORDED: 12/13/2006

REEL: 018713 FRAME: 0231